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PTO/SB/01 (12-97)
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DECLARATION FOR UTILITY OR DESIGN Attorney Docket First Named Inv	Mai Chao Ti						
First Named Inv	entor Mei-Chao Li						
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- · · · · · · · · · · · · · · · ·	COMPLETE IF KNOWN						
(37 CFR 1.63) Application Num	ber /	·					
Filing Date							
Declaration Declaration Submitted OR Submitted after Initial Group Art Unit							
with Initial Filing (surcharge (37 CFR 1.16 (e)) Examiner Name required)							
As a below named inventor, I hereby declare that:							
My residence, post office address, and citizenship are as stated below next to my	name.						
I believe I am the original, first and sole inventor (if only one name is listed below)	or an original, first and joint inventor (if plu	ral					
names are listed below) of the subject matter which is claimed and for which a pa	lent is soudint on the invention contribution	1					
SISTEM AND MENTOD TOTAL	TAL OLUMAZ ZOTA						
AND MONITORING PRODUCTION]					
the specification of which (Title of the Invention)							
is attached hereto	•••						
OR as Unite	d States Application Number or PCT Intern	national					
, mas mas on (, mas)							
Application Number and was amended on (MM/DD/YYYY) (if applicable).							
I hereby state that I have reviewed and understand the contents of the above iden	tified specification, including the claims, as						
amended by any amendment specifically referred to above.	defined in 37 CFR 1.56.						
l acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.							
Prior Foreign Application Foreign Filing Date	Priority Certified Copy Attac	:hed?					
Number(s) Country (MM/DU/TYTT)	Not Claimed YES NO						
90132400 Taiwan Dec/26/01							
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:							
I hereov claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below							
Application Number(s) Filing Date (MM/DD/YYYY)	Additional provisional application numbers are listed on a supplemental priority data septon PTO/SB/02B attached here	on a y data sheet					
[Page 1 of 2]							

[Page 1 of 2]
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DECLARATION -- Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insolar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application. U.S. Parent Application or PCT Parent Parent Filing Date Parent Patent Number Number (MM/DD/YYYY) (if applicable) Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/029 attached hereto. As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: X Customer Number Place Customer 25859 Number Bar Code OR ☐ Rer I abel here Registration Number Name 25859 PATENT TRADEMARK OFFICE Additional registered practitioner(s) named on supplemental Registered Practitioner Information Sheet 1 2C attached hereto Direct all correspondence to: 💹 **Customer Numbi** ice address below or Bar Code Lab Name 25859 Address PATENT_TRADEMARK OFFICE Address State City ZIP Telephone Country I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. A petition has been filed for this unsigned inventor Name of Sole or First Inventor: Given Name (first and middle [if anyl) Family Name or Surname Liu Mei-Chao 01/21/02 Inventor's Liu Mei-Chao Oate Signature Taiwan Taiwan Tu-Chen Citizenship Residence: City Country State 1650 Memorex Drive Post Office Address Post Office Address U.S.A. 95050 SAnta Clara State CA ZIP City Country

supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached herein

Additional inventors are being named on the

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1_ of 1_

Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor										
Given Name (first and middle [if any]) Family Name or Sumame										
Teng-Tsung				Huang						
Inventor's Signature	Huang Teng-Tsung			g			Date	(01/21/0	
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Post Office Address						1				
City	Santa Clara	State	CA		ZIP	95050	Country	U.	S.A	١.
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor										
Given Name (first and middle [if any]) Family Name or Sumame										
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Inventor's Signature		·						Da	te	
Residence: City		State		c	ountry			Citize	nship	
Post Office Address	1650 Memorex Drive									
Post Office Address										
City	Santa Clara	State	CA		ZIP	95050	Coun	try !	J.S	.A.
Name of Additional Joint Inventor, if any:										
Given Name (first and middle [if any]) Family Name or Surname										
Inventor's Signature								Da	Date	
Residence: City	State			Country			Citize	Citizenship		
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City		State			ZIP		С	ountry		

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